



MARCIA J. NIELSEN, PhD, MPH
Interim Executive Director

K A N S A S
KANSAS HEALTH POLICY AUTHORITY

ANDREW ALLISON, PhD
Deputy Director

**Guidelines for Repair or Replacement of Eyeglasses
(Under Workers Compensation Benefits)**

If a work related incident causes destruction or damage to an employee's eyeglasses while being worn, and is found to be compensable, then the following coverage would be applicable.

1. If glasses are repairable, we would pay for the repair and replacement parts.
2. In the event glasses cannot be repaired, we would pay for replacement with a comparable pair of glasses.
3. Should any employee wish to upgrade their glasses, they would be responsible for the difference in cost.
4. Eye examinations are normally covered if there is, or is thought to be, an eye injury, or if a standard examination had not been performed for over a year.

An employee will be reimbursed for the charges, providing we have an itemized statement marked paid by the provider of the services. Or the provider may bill us directly with an itemized statement for payment according to the Kansas Fee Schedule.

Should you have any additional questions, please contact our office.

A WORD OF CAUTION TO OUR STATE EMPLOYEES: YOU MUST COMPLETE THE FORM WC-00 (PRESCRIPTION EYEGLASSES REPLACEMENT FORM) THAT WE SEND YOU AND RETURN IT TO OUR OFFICE BEFORE WE CAN MAKE PAYMENT OF CHARGES.

State Self Insurance Fund
Rm. 951-S, Landon State Office Building
900 SW Jackson
Topeka, Kansas 66612-1251
Phone: 785-296-2364, Fax 785-296-6995

Form WC-00-A
08/06

Address: Rm. 900-N, Landon Building, 900 SW Jackson Street, Topeka, KS 66612-1220

Kansas Medical Assistance Programs:
Phone: 785-296-3981
Fax: 785-296-4813

State Employee Health Benefits and Plan Purchasing:
Phone: 785-296-6280
Fax: 785-368-7180

State Self Insurance Fund:
Phone: 785-296-2364
Fax: 785-296-6995